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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/643,090	
	Filing Date	08/21/2000	
	First Named Inventor	Oleg Drapkin	
	Art Unit	2819	
	Examiner Name	Don P. Le	
Total Number of Pages in This Submission	9	Attorney Docket Number	1376.0001420

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ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return Receipt Postcard
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	J. Gustav Larson, Reg. No. 39,263
Signature	<i>[Signature]</i>
Date	2-28-04

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): Oleg Drapkin et al.
Title: OUTPUT DRIVER APPARATUS AND METHOD THEREOF
App. No.: 09/643,090 Filed: 08/21/2000
Examiner: Don P. Le Group Art Unit: 2819
Atty. Dkt. No.: 1376.0001420

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**AMENDMENT AND RESPONSE TO
EXAMINER'S RESTRICTION REQUIREMENT**

Dear Sir:

In response to the Examiner's Restriction Requirement mailed January 26, 2004, please amend the above-identified application as follows:

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